

COVER PAGE

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Please type or print in ink.

|   |         |            |                          |          |
|---|---------|------------|--------------------------|----------|
| NAME (LAST)                                   | (FIRST) | (MIDDLE)   | DAYTIME TELEPHONE NUMBER |          |
| Quinlan                                       | Christy | D          | ( 916 ) 319-9223         |          |
| MAILING ADDRESS (Business Address Acceptable) | STREET  | CITY       | STATE                    | ZIP CODE |
| 1325 J Street, Suite 1600                     |         | Sacramento | CA                       | 95814    |
| OPTIONAL: E-MAIL ADDRESS                      |         |            |                          |          |

**1. Office, Agency, or Court**

Name of Office, Agency, or Court:

Office of the State Chief Information Officer

Division, Board, District, if applicable:

Your Position:

Chief Deputy Director

► If filing for multiple positions, list additional agency(ies)/position(s): (Attach a separate sheet if necessary.)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

☒ State

☐ County of \_\_\_\_\_

☐ City of \_\_\_\_\_

☐ Multi-County \_\_\_\_\_

☐ Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

☐ Assuming Office/Initial Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2009.

☐ Leaving Office Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate Election Year: \_\_\_\_\_

**4. Schedule Summary**

► Total number of pages including this cover page: 1

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached  
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached  
Investments (10% or Greater Ownership)

Schedule B ☐ Yes - schedule attached  
Real Property

Schedule C ☐ Yes - schedule attached  
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☐ Yes - schedule attached  
Income - Gifts

Schedule E ☐ Yes - schedule attached  
Income - Gifts - Travel Payments

-or-

☒ No reportable interests on any schedule

**5. Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 26, 2009  
(month, day, year)

Signature \_\_\_\_\_  
(File the originally signed statement with your filing official.)